IOWA BOARD OF NURSING

RiverPoint Business Park 400 SW 8TH Street, Suite B Des Moines, IA 50309-4685

INSTRUCTIONS FOR REGISTRATION ADVANCED REGISTERED NURSE PRACTITIONER

I. Qualifications for Registration as required by Chapter 7.

- A. Current licensure as a registered nurse in lowa or licensure as a registered nurse in another compact state, which is your primary state of residence. Primary state of residence is defined as the state where you hold a driver's license, vote and pay taxes.
- B. Graduation from a program leading to a master's degree in a nursing clinical specialty area with preparation in specialized practitioner skills;

OR

Satisfactory completion of a formal advanced practice educational program of study, in a nursing specialty, approved by the board with appropriate clinical experience approved by the board.

C. Time-dated advanced level certification by the appropriate national certifying body approved by the board. (See Section III if you are a new graduate and have not received documentation of current certification.)

II The Advanced Registered Nurse Practitioner categories are:

- A Certified Family Nurse Practitioner
- B Certified Nurse-Midwife
- C Certified Pediatric Nurse Practitioner
- D Certified Registered Nurse Anesthetist
- E Certified School Nurse Practitioner
- F Certified Women's Health Care Nurse Practitioner
- G Certified Psych/Mental Health Nurse Practitioner
- H Certified Adult Nurse Practitioner
- I Certified Clinical Nurse Specialist
- J Certified Gerontological Nurse Practitioner
- K Certified Neonatal Nurse Practitioner
- L Acute Care Nurse Practitioner
- M Perinatal Nurse Practitioner
- N Clinical Nurse Specialist Advanced Diabetes Management
- Q Clinical Nurse Specialist Adult Health
- R Clinical Nurse Specialist Perinatal
- S Clinical Nurse Specialist Medical/Surgical
- T Clinical Nurse Specialist Adult Psych
- U Clinical Nurse Specialist Oncology
- V Clinical Nurse Specialist Gerontology
- W Clinical Nurse Specialist Orthopedics
- X Clinical Nurse Specialist Community Health
- Y Clinical Nurse Specialist Home Health
- Z Clinical Nurse Specialist Child/Adolescent Psych

III Filing Application

- A. The applicant is responsible for submitting the following to the Iowa Board of Nursing:
 - 1. Completed application for registration in Iowa as an Advanced Registered Nurse Practitioner (A.R.N.P.) Note: Do NOT submit the application unless you have the certification exam results to submit with the application. If the certification exam results are arriving separately from the certifying agency, please include a note stating this with your application.
 - 2. \$81.00 fee for any length of registration up to three years (fee must accompany application)
 - 3. If your primary state of residence is another compact state and the compact is in effect in that state, a copy of the current license to practice as a registered nurse in the primary state of residence.
 - 4. A copy of a current certification card or certificate evidencing advanced level certification issued by the national certifying body approved by the board indicating a future expiration date.
 - 5. Newly certified applicants may submit a copy of their letter of notification of passing the certification exam within 90 days of issue if they have not received an actual certification notice.
 - 6. An official transcript from a masters program or formal advanced level educational program of study denoting course of study and clinical experience. Date of graduation/completion of program must appear on the transcript. Transcripts must be received directly from the college. Faxed copies or copies received from the applicant in a sealed envelope will NOT be accepted. (If the same transcript was submitted previously for a different ARNP registration with the board, please include a note stating this with your application.)
- B. If applicant is currently (and will continue to be) an active member of the military or currently (and will continue to be) a Federal Government employee identification such as; military orders, military identification, or federal employee identification must be submitted with the application.
- C. The applicant shall complete the registration process within twelve (12) months of receipt of the application materials. The board reserves the right to destroy the documents after twelve (12) months.
- D. No Temporary Licenses will be issued.

If you have any questions, feel free to contact this office at 515/281-6488 or contact us by email at newnurs@iowa.gov.